A ⁻	TTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY			
	TELEPHONE NO.: FAX NO. (Optional):				
	-MAIL ADDRESS (Optional):				
	ATTORNEY FOR (Name):				
_					
S	UPERIOR COURT OF CALIFORNIA, COUNTY OF				
	STREET ADDRESS:				
	MAILING ADDRESS:				
	CITY AND ZIP CODE:				
	BRANCH NAME:				
		CASE NUMBER:			
	PLAINTIFF/PETITIONER:				
DE	FENDANT/RESPONDENT:	JUDICIAL OFFICER:			
		DEPT.:			
	NOTICE OF RELATED CASE	DEPT.:			
	NOTICE OF RELATED CASE				
Th	e following case or cases are related to the above-captioned case:				
1.	a. Title:				
	b. Court: same as above other (name and address):				
	c. Case number:				
	d. Filing date:				
	-				
	e. Relationship to this case:				
f. If the related case is pending in the same court as this case, explain why the assignment of the cases to a					
single judge is likely to result in efficiencies:					
	Additional explanation is attached in Attachment 1.				
2.	a. Title:				
	b. Court: same as above other (name and address):				
	c. Case number:				
c. Case number:					
d. Filing date:					
	e. Relationship to this case:				
	fulf the related code is pending in the come court on this code, evaluin why the codings	cent of the coope to a			
	f. If the related case is pending in the same court as this case, explain why the assignm single judge is likely to result in efficiencies:	ient of the cases to a			
	Additional explanation is attached in Attachment 2.				
2	Additional related assessment described to Av. 1				
3.	Additional related cases are described in Attachment 3.				
Date:					
	(TYPE OR PRINT NAME OF PARTY OR ATTORNEY) (SIGNATURE OF PART	TY OR ATTORNEY) Page 1 of 2			
		i age i oi z			

				CM-015
PLAINTIFF:				CASE NUMBER:
D	EFENDANT:			
	PROOF OF SEF	RVICE B	Y FIRST-CLASS MAIL	
	NOTIC	CE OF RE	LATED CASE	
	OTE: You cannot serve the Notice of Related Cas Implete this proof of service.)	se if you	are a party in the action.	The person who served the notice must
1.	I am at least 18 years old and not a party to this a place, and my residence or business address is (sp		am a resident of or employ	red in the county where the mailing took
2.	I served a copy of the <i>Notice of Related Case</i> by en and <i>(check one):</i> a deposited the sealed envelope with the Ur	_	·	n postage fully prepaid
	b. placed the sealed envelope for collection a with which I am readily familiar. On the sa deposited in the ordinary course of busine	and proce	essing for mailing, following orrespondence is placed for	or collection and mailing, it is
3.	The Notice of Related Case was mailed:			
	a. on (date):			
	b. from (city and state):			
4.	The envelope was addressed and mailed as follows	s:		
	a. Name of person served:	c.	Name of person served:	
	Street address:		Street address:	
	City:		City:	
	State and zip code:		State and zip code:	
	b. Name of person served:	d.	Name of person served:	
	Street address:		Street address:	
	City:		City:	
	State and zip code:		State and zip code:	
	Names and addresses of additional persons serv	ed are att	ached. (You may use form	n POS-030(P).)
l de	eclare under penalty of perjury under the laws of the	State of 0	California that the foregoin	a is true and correct.
	te:			3

(SIGNATURE OF DECLARANT)

(TYPE OR PRINT NAME OF DECLARANT)